ARIZONA F	OR	2M	Ariz	ona Corp	orate in	icome 1a	ax Ketu	rn					199	16	
120		F	or taxable ye	ar beginning		, 19, an	d ending			19		CI	HECK ONE		
			Mail to: Arize	ona Department	of Revenue, PO	D Box 29079, Ph	noenix AZ 850	38-9079			Ca		year Fiscal y	vear	
Business telephon	e nun	nber		Name									oloyer ID number		
'			Use												
()			label. Otherwise	Number and stre	et						AZ w	AZ withholding tax number			
Business activity c	ode n	umber	please												
from your federal	Form	1120)	print	City or town, state and ZIP code AZ to					ransaction privilege tax number						
			or type												
Check box if:		☐ This i	s a first retu	ırn 🔲 Nam	ne change	Address cl	hange			For D	OR use o	only			
Information		_			J		J								
	V D	id you filo	a fodoral con	scalidated return	2	Yes	No								
00		Did you file a federal consolidated return? L Yes No If yes, federal I.D. no. from consolidated return													
		rizona filing method: <i>check only one</i>													
			-	ny 2 🗖 Com	bined 3 \square	Consolidated									
		If combined or consolidated, see Form 51 instructions													
	A	re there ar	ny additions/	deletions to Forn	າ 51?	Yes	No								
	D Is	this the co	orporation's f	final Arizona retu	rn?	Yes	No								
		-		olved 🔲 Witho		rge/Reorg		81				66	1		
	F	ederal I.D.	no. of the su	uccessor corpora	ition			[0]				100			
Income	1	Taxable	ncome - per	attached federal	return, indicate	e 1120 🔲, 1120	OA 🔲, 1120I	н 🔲 , 112	0F 🔲 ,	Other		1		00	
	2	Additions	to taxable ir	ncome - from pag	ge 2, Schedule	A, line						2		00	
	3	Total tax	able income	- add lines 1 and	12							3		00	
				able income - fro								4		00	
		5 Adjusted income - subtract line 4 from line 3								5		00			
	1	WHOLLY	ARIZONA C	CORPORATIONS	S GO TO LINE	13, MULTISTAT	TE CORPOR <i>i</i>	ATIONS G	O TO LII	NE 6.		•			
	6	Arizona a	adjusted inco	me - <i>from line 5</i>								6		00	
Apportionmer			•	allocable amoun								7		00	
Computation	8	Adjusted	business inc	come - <i>subtract li</i>	ine 7 from line 6	5						8		00	
(Multistate Corporations	9	Arizona a	apportionmer	nt ratio - <i>see Sch</i>	edule C instruc	tions		9 .							
Only)	10		Adjusted business income apportioned to Arizona - line 8 multiplied by line 9						10		00				
<i>0y,</i>	11								11		00				
	12	Adjusted income attributable to Arizona - add lines 10 and 11								12		00			
Arizona												13		00	
Taxable		Arizona basis net operating loss carryforward - attach computation schedule							14		00				
Income			zona income tax - accrual basis taxpayers see Schedule F instructions and check box						15 16		00				
	17							17		00					
		B Enter tax. Tax is 9% of taxable income or fifty dollars (\$50), whichever is greater								18		00			
Tax and	19			f credits - <i>from A</i>								19		00	
Credits	20	Subtotal - add lines 18 and 19							20		00				
	21	Tax credits - from Arizona Form 300, Part II						21		00					
	22														
	23											23		00	
	24			s recapture tax -								24		00	
	25		-	s 23 and 24								25		00	
	26			ition tax paymen							00				
Payments	27 20	•	-	Arizona Form 120				_			00				
	28 29			nts made with Ar instructions							00	29		00	
	30			If line 25 is larger								30		00	
Refund or	31			-								31		00	
Tax Due	32								32		00				
	33	-		ayment penalty a								33		00	
				ent must accomp								34	<u> </u>	00	
												35		00	
				oe applied to you				36			00				
	27	Amount t	n na ratunda	d - subtract line	36 trom line 25							27		Ω	

Ext. Code

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Form 120 (1996)	Page	2				
Schedule A	A1 Taxes based on income paid to any state (including Arizona), local governments or foreign governments					00
Additions		Interest on obligations of other states, foreign countries, or political subdivis	A2	00		
to	А3		A3	00		
Taxable	A 4	Federal net operating loss deduction claimed on federal return	A4	00		
Income	A 5		A 5	00		
	A6		A6	00		
	Α7		•		A7	00
	A8				A8	00
Schedule B		Dividends received from corporations doing 50% or more of their business			B1	00
Subtractions		Dividends received from 50% or more controlled domestic corporations	B2	00		
From		Foreign dividend gross-up	B3	00		
Taxable	B4	3 1	B4	00		
Income	B5		B5	00		
	B6			B6	00	
		Agricultural crops charitable contribution			B7	00
		Alternative fuel vehicles and equipment			B8	00
		Other subtractions allowable - attach schedule			B9	00
	B10	Total - add lines B1 through B9 - enter here and on page 1, line 4			B10	00
	T1					
Schedule C		following information must be submitted by all corporations having income sources both within and without Arizona. Average lines C1(a) through				
Apportionment Formula). Arizona requires a double-weighted sales factor. See instructions on				
(Multistate		es 11 and 12 before completing this section.	(a)	(b)		(c)
Corporations	Total Total					Ratio within
Only)			within Arizona	everywhe	ere	Arizona
····,	C1 /	Average yearly value of real and tangible personal property:		(a) / (b)		
		(a) Inventory				
		(b) Depreciable assets - at original cost				
		(c) Land				
		(d) Other - describe				
		(e) Less construction in progress				
		(f) Less nonbusiness property				
		(g) Net annual rent paid for leased property, multiplied by 8				
		(h) Total real and tangible personal property used				
		Wages, salaries, commissions and other compensation of employees				
		as shown per federal Form 1120 or payroll reports				
		(a) Gross sales, less returns and allowances				
		(b) Sales delivered or shipped to Arizona purchasers:				
		(1) Shipped from outside Arizona				
		(2) Shipped from within Arizona				
	((c) Sales shipped from Arizona to:				
		(1) The United States Government				
		(2) Purchasers in a state where the taxpayer would not be				
		taxable (e.g. under Public Law 86-272)				
	((d) Other gross receipts (rents, royalties, interest, etc.)				
		(e) Total sales within Arizona				
		(f) Double weight sales factor				
		(g) Sales factor ratio. For column (a), multiply line C3(e) by				
	•	line C3(f); for column (b), add lines C3(a) and C3(d)				
	C4 -	Total ratio - add lines C1(h), C2 and C3(g), in column (c)				
		Average ratio - divide line C4 by four (4). Enter the result				
		in column (c) and on page 1, line 9				

Form 120 (1996)	Page 3				
Schedule D	D1 Nonbusiness dividends and interest income:				
Non-	a. Total nonbusiness dividends not deducted on page 2, S	Schedule B D1a	00		
apportionable	b. Interest from nonbusiness sources	00			
Income and	c. Total nonbusiness dividends and interest - add lines D1	D1	-	00	
Expenses	D2 Net royalties from nonbusiness patents and copyrights - a.		D2		00
(Multistate	D3 Net income from rental of nonbusiness assets - attach sch		D2		00
Corporations	D4 Net gain or (loss) from sale or exchange of nonbusiness a				
Only)	income - attach schedule	·	D4		00
5 .	D5 Other income or (loss) - attach schedule		D5		00
	D6 Subtotal - add lines D1c through D5		D/		00
	D7 Expenses attributable to income derived from a foreign co				
	income tax - attach schedule				00
	D8 Total - subtract line D7 from line D6. Enter here and on pa				00
Schedule E	E1 Gain or (loss) from sale or exchange of real estate and oth	ner tangible assets utilized for the prod	uction of		
Other Income	nonbusiness income - attach schedule	•			00
Allocated to	E2 Net income or (loss) from rental of nonbusiness assets - a		1		00
Arizona	E3 Net royalties from nonbusiness patents and copyrights - a.	ttach schedule	E3		00
(Multistate	E4 Net income or (loss) from intangible property specifically a				00
Corporations	E5 Federal income tax refund received in taxable year - see in				00
Only)	E6 Other income or (loss) directly allocable to Arizona - attacl				00
	E7 Total - add lines E1 through E6 - enter here and on page 1	1, line 11	E7		00
Schedule F Arizona Tax Deduction Worksheet	F1 Arizona income before taxes - page 1, line 15	e minimum tax of \$50). Line F5 is your	accrued	F1 F2 F3 F4	00 00 9 00 00 00
Schedule G Schedule	Name of corporation	Federal employer ID number Date of payn	nent Type o	of payment	Amount of payment
of Tax Payments					

Schedule H	Additional Information											
	H1 Date business began in Arizona or date income was first derived from Arizona sources											
	H2 Audit to be conducted at	H2 Audit to be conducted at										
	Audit contact telephone no											
	H4 Have you been notified of a change in your federal net income tax liability for any year prior to the filing of this return?											
	State years (Note: Under ARS § 43-327 you must report these changes under separate											
		cover, when final, to the Arizona Department of Revenue.)										
	List years for which federal waivers are in effect at the close of this year and the date on which they expire											
	H5 Principal business activity											
	H6 Enter amount of Arizona taxable income for prior year											
	H7 Did the corporation pay withholding taxes to Arizona? If so, beginning which year											
	H8 This return is made on the basis of: Cash	Accrual Other (Specify metho	d)									
(Multistate Corporations	H9 Does the Arizona sales figure in Schedule C include (1) all sales delivered from Arizona where purchaser is the U.S. Government and (2) all sales delivered from Arizona to states in which this corporation is immune under Public Law 86-272? If not, attach explanation.											
Only)	H10 Are the amounts shown on lines 1 through 5 of schedule D and column (b), Schedule C the same as those reported in returns to other											
· ,	states under the Uniform Division of Income for Tax Purposes Act? If not, attach explanation.											
Certification	The following certification must be signed by one or	more of the following officers (president, treasurer, or a	any other principal officer).									
	Under penalties of perjury, I (we), the undersigned officer(s) authorized to sign this return, declare that I (we) have examined this return, including the accompanyin schedules and statements, and to the best of my (our) knowledge and belief, it is a true, correct and complete return, made in good faith, for the taxable year state pursuant to the income tax laws of the State of Arizona.											
		I	1									
Please	Officer's signature	Title	Date									
Sign		1										
Here	Officer's signature	Title	Date									
Paid		1										
Preparer's Use Only	Preparer's signature	Date										
	Firm's name (or preparer's, if self-employed)		Preparer's TIN									
	Firm's address	_	ZIP code									